

PATENT
Docket No. 01917590

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of:)
DUDLEY, R.)
Serial No.: 10/033,101) Examiner: JIANG, S.
Filed: OCTOBER 19, 2001) Group Art Unit: 1617
For: PHARMACEUTICAL)
COMPOSITION AND METHOD)
FOR TREATING)
HYPOGONADISM)

SUPPLEMENTAL AMENDMENT "B"

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This Supplemental Amendment "B" is submitted in response to the Office Action
mailed January 10, 2003.

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TRANSMITTAL LETTER

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


Dear Sir:

Transmitted herewith for the above-captioned patent application are:

1. Amendment Transmittal;
2. Supplemental Amendment B; and
3. Post card, to acknowledge receipt of same.

The Commissioner is hereby authorized to charge any additional filing fees required under Rule 1.17 concerning this transaction, or to credit any overpayment to Deposit Account 13-0019.

Respectfully submitted,

By: 

Amanda T. Barry
Reg. No. 51,435
Joseph A. Mahoney
Reg. No. 38,956

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Dated: June 30, 2003

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DUDLEY, R.)
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TREATING HYPOGONADISM)

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AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for the subject application.

2. Applicant is ☐ a small entity.
☒ other than a small entity.

3. **Extension of Term:**

☐ Applicant petitions for an extension of time under 37 C.F.R. §1.136 for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/> one month	\$110.00	\$55.00
<input type="checkbox"/> two month	\$410.00	\$205.00
<input type="checkbox"/> three month	\$930.00	\$465.00
<input type="checkbox"/> four month	\$1,450.00	\$725.00

FEE: \$0.00

OR

- ☒ Applicant believes that no extension of term is required. However, this is a conditional petition being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

4. The fee for claims has been calculated as shown below:

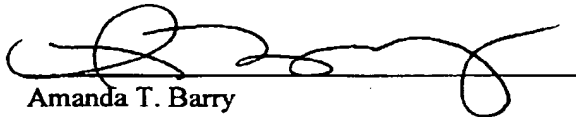
Claims remaining after amendment	Highest number previously paid for	Present Extra	Small entity		Large Entity	
			Rate	Additional Fee	Rate	Additional Fee
Total 50	119	x 0	\$9.00	= \$0	\$18.00	\$0
Independent 4	7	x 0	\$42.00	= \$0	\$84.00	\$0
Total Additional Fee				= \$0		= \$0

- ☒ No additional fee for claims is required.

5. Fee Payment/Deficiency

- ☐ Attached is a check in the amount of \$
- ☐ Authorization is hereby made to charge the amount of \$ to Deposit Account No. 13-0019
- ☒ Charge any additional or deficient fees required by the paper or credit any overpayment to Deposit Account No. 13-0019. A duplicate paper is attached for this purpose.

Respectfully Submitted,



Amanda T. Barry
Reg. No. 51,435

Date: June 30, 2003

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MAYER
BROWN
ROWE
& MAW

FROM: Amanda T. Barry
Direct
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Direct fax: 312-706-8736

Date/time: Monday, June 30, 2003 3:03:50 PM
Pages: 19

ALL PAGES MUST BE NUMBERED

TO THE FOLLOWING:

Name	Company	Fax #
Examiner Jiang	USPTO	1-703-746-6874

Message:

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IF YOU HAVE ANY TRANSMISSION DIFFICULTY,
PLEASE CONTACT THE FACSIMILE DEPARTMENT AT (312) 701-7981

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Independent Mexico City Correspondent: Jauregui, Navarrete, Nader y Rojas, S.C.

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